

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Making Investments Majority Insured PAC

ADDRESS (number and street) ▼

9070 Irvine Center Drive, #150

☐ Check if different than previously reported. (ACC)

Irvine

CA

92618

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00564658

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☒

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

06

07

2016

in the State of

CA

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the State of

5. Covering Period

04

01

2016

through

05

18

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jen Slater

Signature of Treasurer

Jen Slater

[Electronically Filed]

Date

05

24

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Making Investments Majority Insured PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y Y 05 / 18 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2016		7551.11
(b) Cash on Hand at Beginning of Reporting Period.....	5741.82	
(c) Total Receipts (from Line 19)	71843.88	92051.97
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	77585.70	99603.08
7. Total Disbursements (from Line 31)	26446.15	48463.53
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	51139.55	51139.55
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Making Investments Majority Insured PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
04 01 2016

To:

M M / D D / Y Y Y Y Y
05 18 2016

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1500.00

1500.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

1500.00

1500.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

20000.00

26000.58

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

21500.00

27500.58

12. Transfers From Affiliated/Other

Party Committees.....

50343.88

64438.39

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

113.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

**19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶**

71843.88

92051.97

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

71843.88

92051.97

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6046.15	6363.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6046.15	6363.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16500.00	38200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	3900.00	3900.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26446.15	48463.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26446.15	48463.53

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	21500.00	27500.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21500.00	27500.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	6046.15	6363.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	113.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	6046.15	6250.53

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Rebecca L. Anderson

Mailing Address 3525 S 17th St

City

Arlington

State

VA

Zip Code

22204

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Optical Society

Occupation

Director of Public Relations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : INCA190

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Susan A. Andres

Mailing Address 6919 North 30th St

City

Arlington

State

VA

Zip Code

22213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Washington Affairs

Occupation

Sr. Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : INCA188

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sally A. Vastola

Mailing Address 27 Collins Ct

City

Getzville

State

NY

Zip Code

14068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nixon Peabody

Occupation

Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : INCA189

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 23

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. PricewaterhouseCoopers PAC

Mailing Address 600 13th St NW Ste 1000

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2016

Transaction ID : NONA199

Amount of Each Receipt this Period

108.33

☐ Memo Item

Event Costs

Full Name (Last, First, Middle Initial)

B. Airlines for America PAC

Mailing Address 1301 Pennsylvania Ave NW Ste 1100

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2016

Transaction ID : INCA191

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Union Pacific Corporation Fund

Mailing Address 700 13th St NW Ste 350

City

Washington

State

CA

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2016

Transaction ID : INCA192

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6108.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 23
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Majority Committee PAC

Mailing Address PO Box 10134

City State Zip Code
 Bakersfield CA 93389

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 27 2016

Transaction ID : INCA197

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PricewaterhouseCoopers PAC

Mailing Address 600 13th St NW Ste 1000

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 27 2016

Transaction ID : INCA198

Amount of Each Receipt this Period

2891.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Value in Electing Women PAC

Mailing Address 701 8th St NW, #500

City State Zip Code
 Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 27 2016

Transaction ID : INCA196

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12891.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 23

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. General Electric PAC

Mailing Address 1299 Pennsylvania Ave NW, #900

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : INCA201

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

20000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 23

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. McCarthy Walters Victory Committee

Mailing Address 9070 Irvine Center Dr, #150

City	State	Zip Code
Irvine	CA	92618

FEC ID number of contributing federal political committee.

C C00609362

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45884.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2016

Transaction ID : INCA208

Amount of Each Receipt this Period

45884.94

☐ Memo Item

Transfer of Proceeds for Joint Fundraising

Full Name (Last, First, Middle Initial)

B. Frank Greinke

Mailing Address 1800 W Katella Ave, #400

City	State	Zip Code
Orange	CA	92067

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

SC Fuels

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

Transaction ID : IDTA25

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Robert A. Alter

Mailing Address 3334 E Coast Hwy, #410

City	State	Zip Code
Corona Del Mar	CA	92625

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Seaview Investors, LLC

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : IDTA23

Amount of Each Receipt this Period

5000.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

45884.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12
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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. David Horowitz

Mailing Address 27241 La Paz Rd Ste B

City State Zip Code
 Laguna Niguel CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer

Horowitz Group

Occupation

CEO/Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : IDTA19

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Michelle Horowitz

Mailing Address 27241 La Paz Rd Ste B

City State Zip Code
 Laguna Niguel CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michelle Horowitz

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : IDTA20

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. David Wilson

Mailing Address 1400 N Tustin

City State Zip Code
 Orange CA 92876

FEC ID number of contributing
federal political committee.

C

Name of Employer

1400 N Tustin

Occupation

Auto Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : IDTA22

Amount of Each Receipt this Period

5000.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Joseph Y. Ko

Mailing Address 12 Morning Dove

City State Zip Code
 Laguna Niguel CA 92677

FEC ID number of contributing
federal political committee.

C

Name of Employer

Techko Robot, Inc

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : IDTA26

Amount of Each Receipt this Period

1350.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Thomas E. Larkin, Jr

Mailing Address 736 Via Lido Nord

City State Zip Code
 Newport Beach CA 92663

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tommar, LLC

Occupation

Investment Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : IDTA27

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Fritz E. Hitchcock

Mailing Address 9101 Alta Dr, #1702

City State Zip Code
 Las Vegas NV 89145

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hitchcock Automotive Resources

Occupation

Auto Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : IDTA28

Amount of Each Receipt this Period

5000.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Nikki Nichols

Mailing Address PO Box 8610

City	State	Zip Code
City Of Industry	CA	91748

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : IDTA29

Amount of Each Receipt this Period

2100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Joanne Alter

Mailing Address 3334 E Coast Hwy, #410

City	State	Zip Code
Corona Del Mar	CA	92625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2016

Transaction ID : IDTA24

Amount of Each Receipt this Period

400.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Raymond Kennedy

Mailing Address 1717 Bayadere Terrace

City	State	Zip Code
Corona Del Mar	CA	92625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Hotchkis & Wiley

Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2016

Transaction ID : IDTA30

Amount of Each Receipt this Period

2700.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Thomas V. McKernan, Jr

Mailing Address 1070 Fallen Leaf Rd

City State Zip Code
 Arcadia CA 91006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016

Transaction ID : IDTA31

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Judith McKernan

Mailing Address 1070 Fallen Leaf Rd

City State Zip Code
 Arcadia CA 91006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016

Transaction ID : IDTA32

Amount of Each Receipt this Period

2100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Hayde

Mailing Address 8 Executive Circle

City State Zip Code
 Irvine CA 92614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Western National Group

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : IDTA33

Amount of Each Receipt this Period

5000.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Yuri Vanetik

Mailing Address 8502 Chapman Ave, #609

City State Zip Code
Orange CA 92869

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vanetik International, Inc

Occupation

Principal/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : IDTA34

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Mimi Walters Victory Fund

Mailing Address 9070 Irvine Center Drive, #150

City State Zip Code
Irvine CA 92618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18553.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : INCA210

Amount of Each Receipt this Period

4458.94

☐ Memo Item

Transfer of Proceeds for Joint Fundraising

Full Name (Last, First, Middle Initial)

c. B. Wayne Hughes, Jr

Mailing Address 22917 Pacific Coast Hwy, #300

City State Zip Code
Malibu CA 90265

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Commercial Equities, LLC

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : IDTA35

Amount of Each Receipt this Period

5000.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4458.94

50343.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 23

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Campaign Compliance Group, Inc.

Mailing Address 9070 Irvine Center Drive, #150

City Irvine State CA Zip Code 92618

Purpose of Disbursement
Financial Analyst

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2016
Transaction ID : EXPB203

Amount of Each Disbursement this Period

1100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Red River Co LLC

Mailing Address 8501 Bayside Rd, Suite C4-D

City Chesapeake Beach State MD Zip Code 20732

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2016
Transaction ID : EXPB184

Amount of Each Disbursement this Period

3075.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O.Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement
Shipping Costs

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2016
Transaction ID : EXPB186

Amount of Each Disbursement this Period

42.77

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4217.77

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 23

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address Payment Center

City Memphis State TN Zip Code 38101

Purpose of Disbursement
Shipping Costs

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2016
Transaction ID : EDTB4EXPB186

Amount of Each Disbursement this Period

42.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. PricewaterhouseCoopers PAC

Mailing Address 600 13th St NW Ste 1000

City Washington State DC Zip Code 20005

Purpose of Disbursement
Event Costs

Candidate Name

PricewaterhouseCoopers PAC
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 18 / 2016
Transaction ID : NONB199

Amount of Each Disbursement this Period

108.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Joshua Recalde - OCC Republicans

Mailing Address 2855 Pinecreek Drive, Apt E-222

City Costa Mesa State CA Zip Code 92626

Purpose of Disbursement
OCC CRP Convention Trip

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2016
Transaction ID : EXPB187

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

358.33

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. CWLA - CA Womoen's Leadership Assn

Mailing Address 427 C Street, #220

City San Diego State CA Zip Code 92101

Purpose of Disbursement
Membership Dues

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2016
Transaction ID : EXPB205

Amount of Each Disbursement this Period

325.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O.Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement
Shipping Costs

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2016
Transaction ID : EXPB207

Amount of Each Disbursement this Period

45.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address Payment Center

City Memphis State TN Zip Code 38101

Purpose of Disbursement
Shipping Costs

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2016
Transaction ID : EDTB5EXPB207

Amount of Each Disbursement this Period

45.05

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

370.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Campaign Compliance Group, Inc.

Mailing Address 9070 Irvine Center Drive, #150

City Irvine State CA Zip Code 92618

Purpose of Disbursement
Financial Analyst

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

001

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016
Transaction ID : EXPB211

Amount of Each Disbursement this Period

1100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1100.00

6046.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Erin Houchin for Congress

Mailing Address PO Box 234

City
SalemState
INZip Code
47167Purpose of Disbursement
Contribution

011

Candidate Name

Erin Houchin

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2016

Transaction ID : EXPB193

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sheriff Jones for Congress 2016

Mailing Address 1127 11th St, #310

City
SacramentoState
CAZip Code
95814Purpose of Disbursement
Contribution

011

Candidate Name

Scott Jones

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2016

Transaction ID : EXPB200

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Collins for Congress

Mailing Address PO Box 1295

City
GainesvilleState
GAZip Code
30501Purpose of Disbursement
Contribution

011

Candidate Name

Doug Collins

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: GA

District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2016

Transaction ID : EXPB202

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. Diane Black for Congress

Mailing Address PO Box 1437

City
GallatinState
TNZip Code
37066

Purpose of Disbursement

011

Category/
Type

Candidate Name

Diane Black

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN

District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2016

Transaction ID : EXPB209

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

16500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

Full Name (Last, First, Middle Initial)

A. California Homeowners Association

Mailing Address 976 Pacific Avenue

City Willows	State CA	Zip Code 95988
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

011

Candidate Name

California Homeowners Association

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2016

Transaction ID : EXPB185

Amount of Each Disbursement this Period

1400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Maggie's List

Mailing Address 6675 Weeping Willow Way

City Tallahassee	State FL	Zip Code 32311
---------------------	-------------	-------------------

Purpose of Disbursement
Charitable Donation - Surplus Funds

012

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2016

Transaction ID : EXPB206

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3900.00

3900.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Making Investments Majority Insured PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Campaign Compliance Group, Inc.Nature of Debt (Purpose):
Financial Analyst

Mailing Address 9070 Irvine Center Drive, #150

City State Zip Code
Irvine CA 92618

Outstanding Balance Beginning This Period

2200.00

Transaction ID : PAYD166

Amount Incurred This Period

0.00

Payment This Period

2200.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►